

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission Fill in Reporting Period dates: Beginning Date: January 1, 2017 **Ending Date:** March 10, 2017 Type of Report: (Check one) 8th day preceding election 30 day after election 8th day preceding preliminary year-end report dissolution Jennifer S. Page Jennifer Page Committee Candidate Full Name (if applicable) Committee Name Bonnie MacCracken School Committee Office Sought and District Name of Committee Treasurer 291 Potwine Lane, Amherst, MA 01002 8 Chadwick Court, Amherst, MA 01002 Residential Address Committee Mailing Address JenniferPageAmherst@gmail.com JenniferPageAmherst@gmail.com E-mail: Phone # (optional): (413) 654-0635 Phone # (optional): (413) 687-9493 **SUMMARY BALANCE INFORMATION: Line 1:** Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) 4,664.27 Line 3: Subtotal (line 1 plus line 2) 4,664,27 Line 4: Total expenditures this period (page 5, line 14) 1,231.13 Line 5: Ending Balance (line 3 minus line 4) 3,433.14 Line 6: Total in-kind contributions this period (page 6) 456.98 Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: Florence Savings Bank Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Bonne Mar Gacken Date: 3/20/2017 Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority of on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: 3/20/2017 Signed under the penalties of perjury: (Candidate's signature)

#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
02/8/2017	Shing F. Shiao 24 Potwine Lane, Amherst, MA 01002	500	retired
2/8/2017	Julia I. Shiao 24 Potwine Lane, Amherst, MA 01002	500	retired
2/14/2017	Cindy Moy, 150 Jersey Ave S. Golden Valley MN 55426	100	
2/17/2017	Richard Last 590 Middle Street Amherst, MA 01002	100	
2/18/2017	Jackie Wolf 75 Sunset Avenue Amherst, MA	100	
2/22/2017	Donna Ainsworth 39 Dennis Drive Amherst, MA	100	
2/22/2017	Demetria Shabazz 29 Chapel Road Amherst, MA 01002	100	
2/24/2017	Eve Vogel 135 Harlow Drive Amherst, MA 01002	100	
02/25/2017	Pat Ononibaku 28 Tamarack Drive Amherst, MA 01002	75	
2/25/2017	Rose Chin Kao 30 Jefferson Ave Tenafly NJ 07670-1932	500	retired
3/3/2017	Ann Markes 124 Maple Ridge Road Florence, MA 01062	100	
3/4/2017	Caroline Saetti 818 Bay Road Amherst, MA 01002	100	
ine 9: Total Receipts over \$50 (or listed above) 2,375			
Line 10: Total Receipts \$50 and under* (not listed above)		839.27	
Line 11: TOTAL RECEIPTS IN THE PERIOD 3,214.27			← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

# **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
3/10/2017	Sylvia Brandt 1286 South East Street Amherst, MA 01002	200	Associate Professor University of Massachusetts, Amherst
3/10/2017	Su Fong Shiao 22 Melissa Lane Red Bank NJ 07701	500	retired
3/10/2017	Tai Fa Shiao 22 Melissa Lane Red Bank NJ 07701	500	retired
3/10/2017	Paula Page 120 Laurel Wood Way #202 St. Augustine, FL 32086	125	
3/10/2017	Brian Page 120 Laurel Wood Way #202 St. Augustine, FL 32086	125	
Line 9: Total Receipts over \$50 (or listed above) 1,450			
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD  1,450  1,450			← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
2/21/2017	Signrocket	340 Broadway Ave St. Paul Park, MN 55071	Lawn signs	732.5
2/24/2017	Connolly Printing	17B Gill Street Woburn, MA 01801	Lapel buttons	81.29
3/7/2017	Collective Copies	71 South Pleasant St Amherst, MA 01002	Voter outreach literature	390.38
		Line 12: Total Expenditures or	ver \$50 (or listed above)	1,204.17
		Line 13: Total Expenditures \$5	60 and under* (not listed above)	26.96
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	1,231.13

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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# **SCHEDULE B: EXPENDITURES (continued)**

	To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount		
		Line 12: Expenditures over \$50	(or listed above)	0		
		I in 12. From 12.	dawk (mat llated all area)	^		
		Line 13: Expenditures \$50 and	under* (not listed above)	0		
	Enter on page 1, line $4 \rightarrow$	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0		
		include them in line 12. Line 13.c.				

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
2/1/2017	Jennifer Page, Candidate	291 Potwine Lane Amherst, MA 01002	Fees for setting up bank account and EIN #	175
2/6/2017	Jennifer Page, Candidate	291 Potwine Lane Amherst, MA 01002	Monthly website fee	29
2/18/2017	Jennifer Page, Candidate	291 Potwine Lane Amherst, MA 01002	2 Event Admissions to AEF Celebrates Music In Our Schools	103.98
2/22/2017	Jennifer Page, Candidate	291 Potwine Lane Amherst, MA 01002	Tickets to Amherst Survival Center Empty Bowls 2017	80
3/6/2017	Jennifer Page, Candidate	291 Potwine Lane Amherst, MA 01002	Monthly website fee	29
-		Line 15: In-Kind Contributions	over \$50 (or listed above)	416.98
Line 16: In-Kind Contributions \$50 & under (not listed above)			40	
	Enter on page 1, line 6 →	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	456.98

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				0